

LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E

1. File Number U - <i>12377</i>	2. Fiscal Year Covered From: <i>01/01/2004</i> Through: <i>12/31/2004</i>
3. Name and address of person filing. Name <i>William P Taney</i> P.O. Box, Bldg., Room No., if any Street <i>3220 Marlin Ave</i> City <i>St. Paul</i> State <i>MN</i> ZIP Code + 4 <i>55127</i>	4. Name, file number, and address of labor organization. Name <i>IBEW LOCAL 110</i> Labor Organization File Number <i>041-126</i> P.O. Box, Building and Room Number, if any Street <i>1330 CONWAY STREET</i> City <i>St. Paul</i> State <i>MN</i> ZIP Code + 4 <i>55106</i>
5. Position in labor organization. <i>Business Representative</i>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <i>St. Paul Chapter N.E.CA</i> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <i>38 E Lafayette Rd</i> City <i>St. Paul</i> State <i>MN</i> ZIP Code + 4 <i>55107</i>	7.a. Nature of Interest, Transaction, or Income. <i>Business Lunch/Dinner to discuss Electrical Industry matters</i> 7.b. Amount. <i>\$123.00</i>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed *William P Taney*

On *8-15-08* *651-484-7023*
Date Telephone Number

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1. File Number U -	2. Fiscal Year Covered From: 01/01/2004 Through: 12/31/2004
3. Name and address of person filing. Name Richard J. Vitelli P.O. Box, Bldg., Room No., if any Street 423 MAINZEN ST. City West ST. Paul MN State MN ZIP Code + 4 55118	4. Name, file number, and address of labor organization. Name IBEW LOCAL UNION 110 Labor Organization File Number 041-126 P.O. Box, Building and Room Number, if any Street 1330 CONWAY STREET City ST Paul State MN ZIP Code + 4 55106
5. Position in labor organization. Business Mgr / Financial Secretary	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name St. Paul Chapter NECA Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 380 E Lafayette Rd City St. Paul State MN ZIP Code + 4 55107	7.a. Nature of Interest, Transaction, or Income. Business Lunches / Dinners to discuss Electrical Industry Issues 7.b. Amount. \$346.00

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

Date

Telephone Number